

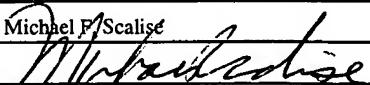
UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 1.53(b))</i>		Attorney Docket No.	37505.0230
		First Inventor	Biggs et al.
		Title	One Piece Header Assembly For An Implantable Medical Device
		Express Mail Label No.	EU940429282US
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>		Commissioner for Patents ADDRESS TO: Box Patent Application Washington, D.C. 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. <i>See CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification <u>[Total Pages /24 /]</u> <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) <u>(35 USC 113)</u> <u>[Total Sheets /9 /]</u> 5. <input checked="" type="checkbox"/> Oath or Declaration <u>[Total Pages /3 /]</u> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</i> 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies			
ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none"> 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 17. <input checked="" type="checkbox"/> Other: <u>Credit Card Forms for \$40.00 and \$824.00</u> 			

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of the prior application No: /

Prior application information: Examiner: _____ Group/Art Unit: _____
 For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		33751				or <input checked="" type="checkbox"/> Correspondence address below	
NAME		Michael F. Scalise					
		Wilson Greatbatch Technologies, Inc.					
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Name (Print/Type)		Michael F. Scalise		Registration No. (Attorney/Agent)		34,920	
Signature				Date		November 5, 2003	

"Express Mail" Mailing Label Number EU940429282US

Date of Deposit November 5, 2003

I hereby Certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Alexandria, VA 22313-1450.

Rosemarie Contella
Name


Signature

FEE TRANSMITTAL for FY 2002

Patent Fees are subject to annual revision.

G Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 864.00)

Application Number

November 5, 2003

Filing Date

First Named Inventor

Biggs et al.

Examiner Name

Group/Art Unit

37505.0230

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																											
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> G Money Order <input type="checkbox"/> G Other <input type="checkbox"/> G None Deposit Account: Deposit Account Number: <u>502460</u> Deposit Account Name: _____ The Commissioner is hereby authorized to (check all that apply)				3. ADDITIONAL FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 2px;">Large Entity</th> <th style="text-align: left; padding: 2px;">Small Entity</th> <th colspan="2" style="text-align: left; padding: 2px;">Fee Description</th> <th style="text-align: right; padding: 2px;">Fee Paid</th> </tr> <tr> <th style="text-align: left; padding: 2px;">Fee Code</th> <th style="text-align: left; padding: 2px;">Fee (\$)</th> <th style="text-align: left; padding: 2px;">Fee Code</th> <th style="text-align: left; padding: 2px;">Fee (\$)</th> <th style="text-align: right; padding: 2px;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td style="text-align: left; padding: 2px;">105</td> <td style="text-align: left; padding: 2px;">130</td> <td style="text-align: left; padding: 2px;">205</td> <td style="text-align: left; padding: 2px;">65</td> <td style="text-align: right; padding: 2px;">\$</td> </tr> <tr> <td style="text-align: left; padding: 2px;">127</td> <td style="text-align: left; padding: 2px;">50</td> <td style="text-align: left; padding: 2px;">227</td> <td style="text-align: left; padding: 2px;">25</td> <td style="text-align: right; padding: 2px;">\$</td> </tr> <tr> <td style="text-align: left; padding: 2px;">139</td> <td style="text-align: left; padding: 2px;">130</td> <td style="text-align: left; padding: 2px;">139</td> <td style="text-align: left; padding: 2px;">130</td> <td style="text-align: right; padding: 2px;">\$</td> </tr> <tr> <td colspan="4" style="text-align: left; padding: 2px;">Surcharge - late filing fee or oath</td> <td style="text-align: right; padding: 2px;">\$</td> </tr> <tr> <td colspan="4" style="text-align: left; padding: 2px;">Surcharge - late provisional filing fee or cover sheet</td> <td style="text-align: right; padding: 2px;">\$</td> </tr> <tr> <td colspan="4" style="text-align: left; padding: 2px;">Non-English specification</td> <td style="text-align: right; padding: 2px;">\$</td> </tr> </tbody> </table>				Large Entity	Small Entity	Fee Description		Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Paid	105	130	205	65	\$	127	50	227	25	\$	139	130	139	130	\$	Surcharge - late filing fee or oath				\$	Surcharge - late provisional filing fee or cover sheet				\$	Non-English specification				\$
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Petition to the Commissioner		Fee Description		Fee Paid																																											
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Petition to the Commissioner		Fee Description		Fee Paid																																											
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Petition to the Commissioner		Fee Description		Fee Paid																																											
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Petition to the Commissioner		Fee Description		Fee Paid																																											
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Petition to the Commissioner		Fee Description		Fee Paid																																											
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